NO DISCHARGE INDICATOR:

 SUBMISSION ID:
 936073
 STATUS:
 Original

 FACILITY:
 H2-Oh-Yeah
 PERMIT NUMBER:
 4MP00028\*AM

 LOCATION:
 2134 C.R. 224
 STATION CODE:
 401

Ashley, OH 43003 MONITORING PERIOD :

COUNTY: Morrow REPORTING LAB:
DISTRICT: CDO ANALYST: Kari Long

Application Nitrogen, Nitrogen, Nitrite Plus Phosphorus, Rate-PARAMETER На Ammonia Inorganic, E. coli Nitrate, Total Total (P) Wastewater, (NH3) Total Spray **PARAMETER** 00400 00610 00630 00640 00665 31648 50045 CODE UNITS S.U. mg/l mg/l mg/l mg/l #/100 ml inches/day FREQUENCY When Disch. **SAMPLING** Grab Grab Grab Grab Grab Grab Total TYPE 2020-02-01 2020-02-02 2020-02-03 2020-02-04 2020-02-05 2020-02-06 2020-02-07 2020-02-08 2020-02-09 2020-02-10 2020-02-11 2020-02-12 2020-02-13 2020-02-14 2020-02-15 2020-02-16 2020-02-17 2020-02-18 2020-02-19 2020-02-20 2020-02-21 2020-02-22 2020-02-23 2020-02-24 2020-02-25 2020-02-26 2020-02-27 2020-02-28 2020-02-29 Minimum Maximum **Average** Count Name of Responsible I certify under the penalty of law that I | Signature of Responsible Official or Submission Date/Time Official or Authorized **Authorized Representative** have personally examined and am Representative familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the Certification submitted information is true, accurate Jeff **Version Date** and complete. I am aware that there Williamson are significant penalties for submitting 2020-03-19 11:03 false information, including the possibility of fine and imprisonment

Page 1

2020-02-01 To: 2020-02-29

AL

 SUBMISSION ID:
 936073
 STATUS:
 Original

 FACILITY:
 H2-Oh-Yeah
 PERMIT NUMBER:
 4MP00028\*AM

 LOCATION:
 2134 C.R. 224
 STATION CODE:
 401

Ashley, OH 43003 MONITORING PERIOD :

COUNTY: Morrow REPORTING LAB:
DISTRICT: CDO ANALYST: Kari Long

ANALYST: Kari Long
NO DISCHARGE INDICATOR: AL

				NO	DISCHARGE II	NDICATOR:	AL	
PARAMETER	Flow R	ate						
PARAMETER CODE	5005	0						
UNITS	MGI	)						
FREQUENCY	When D	isch.						
SAMPLING	24hr T	otal						
TYPE	Estim	ate						
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2020-02-02								
2020-02-03								
2020-02-04	<b></b>							
2020-02-05								
2020-02-06	<b></b>			<b></b>			<b></b>	
2020-02-07 2020-02-08								
2020-02-08							<b></b>	
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2020-02-11								
2020-02-12								
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2020-02-14								
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2020-02-20								
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Maximum							<b></b>	
Average								
Count		***************************************						
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Official or Authorized		have p	ersonally exam	ined and am	Author	ized Represent	ative	Date/Time
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			ted herein and					
			of those indivi					
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	i							Version Date
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immediately responsible the information, I believe submitted information is and complete. I am award are significant penalties false information, include possibility of fine and im			eve the is true, accurate rare that there es for submitting uding the	÷				

Page 2

 SUBMISSION ID:
 936073
 STATUS:
 Original

 FACILITY:
 H2-Oh-Yeah
 PERMIT NUMBER:
 4MP00028\*AM

 LOCATION:
 2134 C.R. 224
 STATION CODE:
 402

Ashley, OH 43003 MONITORING PERIOD :

COUNTY:MorrowREPORTING LAB:DISTRICT:CDOANALYST:Kari Long

NO DISCHARGE INDICATOR: AL

			N	O DISCHARGE I	NDICATOR:	AL	
PARAMETER	рН	Nitrogen, Ammonia (NH3)	Nitrite Plus Nitrate, Total	Nitrogen, Inorganic, Total	Phosphorus, Total (P)	E. coli	Application Rate- Wastewater, Spray
PARAMETER CODE	00400	00610	00630	00640	00665	31648	50045
UNITS	S.U.	mg/l	mg/l	mg/l	mg/l	#/100 m	l inches/day
FREQUENCY	When Disch.	When Disch.	When Disch.	When Disch.	When Disch.	When Dis	
SAMPLING TYPE	Grab	Grab	Grab	Grab	Grab	Grab	Grab
2020-02-01							
2020-02-02							
2020-02-03							
2020-02-04							
2020-02-05							
2020-02-06							
2020-02-07							
2020-02-08							
2020-02-09							
2020-02-10							
2020-02-11							
2020-02-12							
2020-02-13							
2020-02-14							
2020-02-15							
2020-02-16							
2020-02-17							
2020-02-18							
2020-02-19							
2020-02-20		8					
2020-02-21						l	
2020-02-22							
2020-02-23							
2020-02-24							
2020-02-25							
2020-02-26							
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		tted herein and					
	inquir	y of those indiv	iduals	1			
001000000000000000000000000000000000000			ble for obtainin	g l	200000000000000000000000000000000000000	200000000000000000000000000000000000000	
		formation, I beli		<b>`</b>			
1 - 44			is true, accura	te			Certification
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Page 3

 SUBMISSION ID:
 936073
 STATUS:
 Original

 FACILITY:
 H2-Oh-Yeah
 PERMIT NUMBER:
 4MP00028\*AM

 LOCATION:
 2134 C.R. 224
 STATION CODE:
 402

Ashley, OH 43003 MONITORING PERIOD :

COUNTY:MorrowREPORTING LAB:DISTRICT:CDOANALYST:Kari Long

NO DISCHARGE INDICATOR: AL

				N	DISCHARGE II	NDICATOR:	AL	
PARAMETER	Flow R	ate						
PARAMETER CODE	5005	9						
UNITS	MGC							
FREQUENCY	When D							
SAMPLING	24hr To	000000000000000000000000000000000000000						
TYPE	Estima							
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2020-02-03					~~~~			
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2020-02-18	<b></b>							
2020-02-19 2020-02-20								
2020-02-20								
2020-02-22					***************************************			
2020-02-23	<b></b>							
2020-02-24								
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2020-02-27								
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2020-02-29								
Minimum					***************************************			
Maximum					***************************************			
Average			***************************************		***************************************			
Count								
submitted her		y under the per ersonally exam: r with the infor ted herein and of those indivi	ined and am mation based on my	I Signature o Author	f Responsible ized Represent		Submission Date/Time	
Jeff Williamson Williamson  Jeff Williamson  Jeff Williamson  Jeff Williamson  Williamson  Jeff Williamson  Willia				9			Certification Version Date 2020-03-19 11:03	

Page 4

 SUBMISSION ID:
 936073
 STATUS:
 Original

 FACILITY:
 H2-Oh-Yeah
 PERMIT NUMBER:
 4MP00028\*AM

 LOCATION:
 2134 C.R. 224
 STATION CODE:
 403

Ashley, OH 43003 MONITORING PERIOD :

COUNTY:MorrowREPORTING LAB:DISTRICT:CDOANALYST:Kari LongNO DISCHARGE INDICATOR:AL

				IV	O DISCHARGE I	NDICATOR:	AL	
PARAMETER	pŀ	I	Nitrogen, Ammonia (NH3)	Nitrite Plus Nitrate, Total	Nitrogen, Inorganic, Total	Phosphorus, Total (P)	E. coli	Application Rate- Wastewater, Spray
PARAMETER CODE	004	00	00610	00630	00640	00665	31648	
UNITS	S.L	I.	mg/l	mg/l	mg/l	mg/l	#/100 m	ıl inches/day
FREQUENCY	When [		When Disch.	When Disch.	When Disch.	When Disch.	When Dis	
SAMPLING					Grab			
TYPE	Gra	IJ	Grab	Grab	Grap	Grab	Grab	Grab
2020-02-01								
2020-02-02								
2020-02-03								
2020-02-04								
2020-02-05								
2020-02-06	ļ							
2020-02-07	<b></b>		<b>&amp;</b>				<b></b>	
2020-02-08	<b></b>						<b></b>	***************************************
2020-02-09	<b> </b>		<b></b>		<b></b>		<b>!</b>	
2020-02-10	<u> </u>			-				
2020-02-11				-				
2020-02-12								
2020-02-13	<b></b>		<u> </u>				-	
2020-02-14 2020-02-15			<u></u>	-	<b>}</b>			
2020-02-15	<del></del>			<b>-</b>				
2020-02-16	<b></b>		<b></b>					
2020-02-17	<b></b>		<u></u>	<b>-</b>			<b></b>	
2020-02-19	<b></b>		<b>&amp;</b>				<b></b>	
2020-02-20	<del>                                     </del>		<u> </u>					
2020-02-21	<del>                                     </del>		8					
2020-02-22	<del>                                     </del>							
2020-02-23	<del> </del>							
2020-02-24	<b>i</b>		8					
2020-02-25			8					
2020-02-26								
2020-02-27								
2020-02-28								***************************************
2020-02-29								
Minimum			8				I	
Maximum	Ĭ							
Average	1							
Count		000000000000000000000000000000000000000					000000000000000000000000000000000000000	.00000000000000000000000000000000000000
Name of Resp	onsible	I certif	fy under the pe	nalty of law that	:   Signature o	of Responsible	Official or	Submission
Official or Aut	horized	have n	ersonally exam	nined and am	Author	rized Represent	tative	Date/Time
Representative		familia	r with the info	rmation	1	•		
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			y of those indiv					
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			formation, I bel		9			
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		raise ii	nformation, inc	cluding the				
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Page 5

 SUBMISSION ID:
 936073
 STATUS:
 Original

 FACILITY:
 H2-Oh-Yeah
 PERMIT NUMBER:
 4MP00028\*AM

 LOCATION:
 2134 C.R. 224
 STATION CODE:
 403

Ashley, OH 43003 MONITORING PERIOD :

COUNTY: Morrow REPORTING LAB:

DISTRICT: CDO ANALYST: Kari Long
NO DISCHARGE INDICATOR: AL

			NO	DISCHARGE II	VDICATOR:	AL	
PARAMETER	Flow Rate						
PARAMETER CODE	50050						
UNITS	MGD						
FREQUENCY	When Disch	i.					
SAMPLING	24hr Total						
TYPE	Estimate						
2020-02-01							
2020-02-02							
2020-02-03							
2020-02-04							
2020-02-05							
2020-02-06							
2020-02-07							
2020-02-08							
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2020-02-19				***************************************			
2020-02-20							
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2020-02-22							
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2020-02-26							
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2020-02-28		8					
2020-02-29							
Minimum							
Maximum				000000000000000000000000000000000000000			
Average			8				
Count	2 2 2 20000000000000000000000000000000	5 5 5 5 5 5 5 5 7 7 7 7 7 7 7 7 7 7 7 7	000000000000000000000000000000000000000	100000000000000000000000000000000000000			
Name of Resp	onsible I ce	rtify under the p	enalty of law that l	Signature o	f Responsible	Official or	Submission
Official or Aut	horized hav	e personally exar	nined and am		ized Represent		Date/Time
Representa		iliar with the info			-		
		mitted herein and					
		airy of those indi					
000000000000000000000000000000000000000			sible for obtaining	800000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
		information, I be					
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William	SOII are		ties for submitting				2020-03-19 11:03
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	pos	sibility of fine an	d imprisonment.		***********************************		8 8

Page 6

 SUBMISSION ID:
 936073
 STATUS:
 Original

 FACILITY:
 H2-Oh-Yeah
 PERMIT NUMBER:
 4MP00028\*AM

 LOCATION:
 2134 C.R. 224
 STATION CODE:
 602

Ashley, OH 43003 MONITORING PERIOD :

COUNTY:MorrowREPORTING LAB:BrookesideDISTRICT:CDOANALYST:Kari Long

NO DISCHARGE INDICATOR:

			141	D DISCHARGE II	NDICATOR:		
PARAMETER	Biochemical Oxygen Demand, 5 Day	Total Suspended Solids	Nitrogen, Ammonia (NH3)	Phosphorus, Total (P)	E. coli	Flow Rat	e Sludge Solids, Percent Total
PARAMETER CODE	00310	00530	00610	00665	31648	50050	70318
UNITS	mg/l	mg/l	mg/l	mg/l	#/100 ml	MGD	%
FREQUENCY	1/Week	1/Week	1/2 Weeks	1/2 Weeks	1/2 Weeks	1 / 2 Wee	ks 1/2 Weeks
SAMPLING TYPE	Grab	Grab	Grab	Grab	Grab	24hr Tot Estimate	
2020-02-01		***************************************		***************************************			
2020-02-02							
2020-02-03	3336	19.2	132	AC	AC	.00138	AC
2020-02-04							
2020-02-05				***************************************			***************************************
2020-02-06							
2020-02-07							
2020-02-08							
2020-02-09							
2020-02-10	1110	17	1148	26574.25	AC		
2020-02-11		***************************************		***************************************			
2020-02-12							
2020-02-13							
2020-02-14							
2020-02-15							
2020-02-16	3346 F	7.000				00130	**
2020-02-17 2020-02-18	1246.5	1800				.00138	AC
2020-02-18							
2020-02-19							
2020-02-20				***************************************			
2020-02-21							
2020-02-22	1461	10.7					
2020-02-24	1401	10.7					
2020-02-25							
2020-02-26							
2020-02-27							
2020-02-28							
2020-02-29							
Minimum	1110.0	10.7	132.0	26574.25		0.00138	}
Maximum	3336.0	1800.0	1148.0	26574.25		0.00138	·····
Average	1788.375	461.725	640	26574.25		0.00138	
Count	4	4	2	1		2	
Name of Responsible I certify under the penalty of law that I Official or Authorized have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals			I Signature o	f Responsible ( ized Represent	Official or	Submission Date/Time	
Jeff William	immed the info submit and cor son are sign false in	ole for obtaining	e			Certification Version Date 2020-03-19 11:03	

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 SUBMISSION ID:
 936073
 STATUS:
 Original

 FACILITY:
 H2-Oh-Yeah
 PERMIT NUMBER:
 4MP00028\*AM

 LOCATION:
 2134 C.R. 224
 STATION CODE:
 602

Ashley, OH 43003 MONITORING PERIOD :

COUNTY:MorrowREPORTING LAB:BrookesideDISTRICT:CDOANALYST:Kari Long

NO DISCHARGE INDICATOR:

			N	O DISCHARGE II	NDICATOR:		
PARAMETER	Sludge Solids, Percent Volatile	Freeboard	рН	Oil and Grease, Hexane Extr Method	Nitrogen Kjeldahl, Total	Nitrogei Inorgani Total	
PARAMETER CODE	70322	82564	00400	00552	00625	00640	
UNITS	%	feet	S.U.	mg/l	mg/l	mg/l	
FREQUENCY	1 / 2 Weeks	1 / 2 Weeks	1/Month	1/Month	1/Month	1/Month	1
SAMPLING TYPE	Grab	Total	Grab	Grab	Grab	Grab	
2020-02-01							
2020-02-02							
2020-02-03	AC	2	8.05	140	163	132	
2020-02-04							
2020-02-05		***************************************					
2020-02-06							
2020-02-07							
2020-02-08							
2020-02-09							
2020-02-10							
2020-02-11							
2020-02-12							
2020-02-13							
2020-02-14							
2020-02-15							
2020-02-16							
2020-02-17	AC	2					
2020-02-18 2020-02-19							
2020-02-19							
2020-02-20							
2020-02-21							
2020-02-22							
2020-02-23							
2020-02-25							
2020-02-26							
2020-02-27							
2020-02-28							
2020-02-29							
Minimum		2.0	8.05	140.0	163.0	132.0	
Maximum		2.0	8.05	140.0	163.0	132.0	
Average		2	0.03	140	163	132	
Count		2	1	1	1	1	
	onciblo I contif			В се при	dicenses consecutive and a second consecutive		Submission
Name of Resp	horized	y under the per	iaity of iam that	Author	f Responsible ( ized Represent	orricidi Uf Stiva	Date/Time
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		ted herein and					
		of those indivi					
		iately responsil		J			
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		mplete. I am aw	are that there				Version Date
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FACILITY: LOCATION: H2-Oh-Yeah 2134 C.R. 224 PERMIT NUMBER: MONITORING PERIOD: 4MP00028\*AM

2020-02-01 To: 2020-02-29

Ashley, OH 43003

#### **PARAMETER COMMENTS:**

Station Code	Parameter Name	Parameter Code	Date	Unit	Comment
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